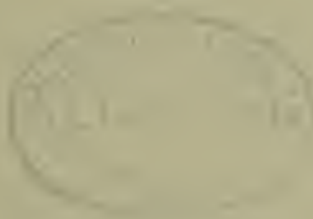


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DEPWADE RURAL DISTRICT COUNCIL

ANNUAL REPORT OF MEDICAL OFFICER OF HEALTH FOR 1954:

With the Annual Reports of (a) Senior Sanitary Inspector
and (b) Water and Sewerage Engineer attached.



Council Offices,
Pulham Market,
Diss, Norfolk.

THE RURAL DISTRICT OF DEPWADE

The Annual Report of the Medical Officer of Health for the year 1954.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1954.

I. Introduction

Apart from a measles epidemic in the early part of the year and a moderate amount of whooping-cough, the state of health of the community of Depwade District maintained a high level.

The population of Depwade Rural District remains steady; the estimated population for 1954 is 18,150. The birth rate for this period was very much the same and the death rate a little higher than that of England and Wales for the same period. But it is a remarkable fact that there were only two infant deaths. And here it should be stated that there were only four infant deaths recorded for the whole of Area 5, while the births were 560, giving a remarkably low infant death rate of 7.1 per 1,000 live births.

A list of the more important enactments of public health interest introduced in 1954 are included in this Report as an indication of present trends and advances in the promotion of public health.

During the year particular interest was focussed on certain advances in the control of communicable diseases: the use of a vaccine for the control of poliomyelitis; the introduction, to a limited extent, of B.C.G. vaccination in Norfolk for the better protection of school-leavers against tuberculosis; the addition of tetanus toxoid to the diphtheria-whooping cough prophylactic in general use for the immunisation of infants. The inoculation thus used is known as "triple antigen". Furthermore, the decision to create in Norfolk specified areas (Depwade Rural District is now one of these) wherein only heat-treated milk or milk from T.T. herds may be offered for sale, is designed, of course, to reduce the incidence of tuberculosis.

In recent times there is a tendency to a general increase in cases of food poisoning and dysentery. Fortunately, the Depwade District showed a reduction in cases in 1954 compared with the previous two years.

With the ending of meat rationing, the re-introduction of the local licensed slaughter-house was a feature of the year.

The number of fatal home accidents in England and Wales is increasing year by year. In children between the ages of one and four years a fatal home accident is now the third largest cause of death.

As the years go by problems affecting the social and medical welfare of the aged will require increasing attention. In 1951 there were six-and-three-quarter million people of pensionable age; it is estimated that by 1979 there will be nine-and-a-half million people of pensionable age while the number of persons of working age will remain much the same as in 1951.

II. Administration

Mr. F. H. Bowden continued duty as Sanitary Inspector to your Council until his retirement on 30.9.54 when he was succeeded by Mr. F. C. Weeks, C.S.I.B., M.R., San. I., etc., Mr. R. D. Prichard was appointed additional Sanitary Inspector on 9.8.54. Clerical assistance for your Medical Officer of Health was carried out by the Senior Clerk and Staff at the central health office, Norwich.

III. Legislation

The following enactments concerned with public health matters were introduced or were under consideration in 1954.

(a) The Housing Repairs and Rents Act 1954

"An Act to make further provision for the clearance and re-development of areas of unfit housing accommodation and for securing or promoting the reconditioning and maintenance of houses; and otherwise to amend the enactments relating to housing, the exercise of certain powers relating to land, and rent control".

(b) Food and Drugs Amendment Act 1954

This Act provides wider and additional legislation for improved food hygiene as compared with previous Acts. The chief purpose is the better protection of the public against the risk of injury to health through the medium of food. This is particularly necessary as a result of the present day development of communal feeding. The Act received the Royal Assent in November but will not come into force until a date appointed by the Minister of Food.

(c) Slaughterhouses Act 1954

With the ending of meat rationing in 1954, local authorities became responsible for securing adequate local facilities for slaughtering.

(d)(i) The Slaughter of Animals (Amendment) Act 1954 and (ii) The Slaughter of Animals (Prevention of Cruelty) Regulations 1954.

This Act deals with the licensing of premises for the slaughter of animals; licensing of slaughtermen; humane conditions and penalties. The drafting of this new Act had its origin in the need to implement the recommendations of the Committee of Inquiry into the Slaughter of Horses. The detailed Prevention of Cruelty Regulations are an extension of powers under this Act.

(e) The Milk (Special Designation) (Raw Milk) (Amendment) Regulations 1954

Under these Regulations south east Norfolk has been included in what is known as a "specified area", i.e. an area in which only specially designated milk - pasteurised, tuberculin-tested, and sterilised - may be sold. The special designation "Accredited" is no longer permitted. Reference to further recent regulations regarding the sale of milk are referred to in a later section of this Report.

IV. Vital Statistics

(a) Population

The Registrar General estimates the population of Depwade Rural District at 18,150 compared with 18,040 in 1953.

- (b) Births. There were 273 live births recorded during the year; 153 males and 120 females. In 1953 there were 260 live births. There were ten still births and twelve illegitimate births. The birth-rate was, therefore, 15.0 per 1,000 of the resident population compared with 15.2 for England and Wales.

- (c) Deaths numbered 235 (119 male and 116 female) compared with 200 deaths in 1953. The crude death rate was, therefore, 12.9 compared with 11.08 in 1953. The death rate for England and Wales was 11.3

- (d) Infant Mortality. There were only two deaths of infants under one year of age, compared with eight deaths in 1953. One of these was due to congenital malformations and one the result of pneumonia. The infant death rate (i.e. deaths under one year of age per 1,000 live births) was therefore only 7.3 compared with 25.5 for the same period in England and Wales.

(e) The Changing Age Structure of the Population

Considerable interest has been focussed on the change in the age structure of the population of England and Wales at the present time. The fact that the number of old people in the population is steadily increasing has significant social and economic implications. In the introduction to the Report of the Ministry of Health 1953, the Chief Medical Officer comments on this problem. "One of the commonly held fallacies is that as time goes on the proportion of the population in the normal working ages will be materially reduced. While this proportion may in fact become slightly smaller, the main long-term change to be expected is that there will be on the one hand more old people and on the other fewer children in the population. We are in fact approaching the age distribution to be expected in a stationary population with relatively low mortality. The main implications of this change for our health services are already fairly clear. The burden of ill health in old people can be exceedingly heavy but in taking steps to alleviate that burden by appropriate preventive care and rehabilitation we can also ensure that the resources of the health services are not unduly strained.

One factor contributing to the changes in age distribution is the rapid decline in the birth rate since the beginning of the century and its recent tendency to settle at a level just sufficient for each generation to replace itself. The other main factors are the greatly increased expectation of life of the infant at birth, the contemporaneous and accelerated fall in the infant mortality rate and the remarkable decline in mortality among children in later years. Under the conditions ruling in 1838-54 a male infant at birth might have been expected to live rather less than 40 years. By the period 1871-80, his expectation of life had increased to 41.4 years. Between the periods 1881-90 and 1910-12 it again increased to 49.2 years and between 1920 and 1952 to an expectation of more than 67 years of life.

This does not mean, however, that old people are living much longer, and any impression that they are is a further misconception which is not borne out by the statistics. Considering the expectation of life of males again, we find that the expectation of life at 65 years of age was in 1838-54 10.8 years and in 1952 12.0 years. Thus old people are not living appreciably longer. What is happening is that many more of us are now attaining the age of 65 than was the case formerly and it is only in this sense that we are becoming an older population; we are still a very long way from becoming a nation of centenarians".

V. Infectious Diseases (other than tuberculosis)

- (a) 684 cases of communicable diseases were notified by general practitioners during the year and 535 of these were cases of measles. Measles was making its usual biennial appearance.
- (b) Sixteen cases of Scarlet Fever (in the mild form characteristic of present day infections) were notified. Ten of these occurred in the 5 to 9 age group. The usual precautions were taken to prevent the spread of infection.
- (c) There were seventy-three cases of whooping-cough. It is reasonable to expect a reduction in the incidence of this disease in future years as a result of the fairly extensive inoculation of infants with the combined diphtheria-whooping cough antigen which has become increasingly popular.
- (d) Twelve cases of Infective Jaundice were notified; nearly all of these occurred amongst school children at Earsham. This virus disease, of which we have limited knowledge, is notifiable in East Anglia where a special study of the disease is being made. There is reason to believe that it is spread by infected excreta - a further reason for careful personal hygiene backed by the provision of modern sanitation.
- (e) Bacillary dysentery of the Sonne type accounted for seven notifications. This highly infectious disease is difficult to eradicate once it becomes established in a town or village and calls for the detection of symptomless carriers. Food-handlers who are suspected or proved carriers are excluded from work until cured by treatment. Strict personal hygiene is essential; written instructions on precautions to be taken are issued to families in which cases occur.
- (f) Poliomyelitis is another disease that is probably spread by faecal matter (as well as by throat excretions). It is considered to be a highly infectious disease spread by intimate association with infected persons. As in the case of dysentery written advice regarding precautions is given to families in which a case occurs.

Three cases were notified in the Depwade district during 1954.

The field trial of poliomyelitis vaccine sponsored by the National Foundation for Infantile Paralysis in America and carried out on a vast scale in 1954 indicates that a vaccine will be found which should prove an effective method of preventing paralytic poliomyelitis. But it is too early to foretell when such a vaccine is likely to be in general use. Several points have to be cleared up: how long will protection last after a course of inoculations?; at what age should the vaccine be given in order to obtain the best response? What should be the exact timing of the three doses necessary for full immunity? Finally - and most important - comes the "foolproofing" of laboratory production in which the responsibility is great because the working margin of error must be small enough to be insignificant.

- (g) The remaining communicable diseases notified were: pneumonia, 23; erysipelas, 9; food poisoning, 1; malaria, 1; and Weil's disease, 1.
- (h) Diphtheria cases are no longer anticipated in our local statistics. The disease has not been completely eradicated, however, from England and Wales; but the dramatic fall in cases and deaths year by year continues. In the last ten years notifications have fallen from over 18,500 in 1945 to a new low figure of 182 in 1954 while deaths have declined from 722 in 1945 to 9 in 1954.

In order to obtain eradication of the disease it is considered necessary to secure immunisation of not less than 75% of babies before their first birthday. At the present time less than half this percentage of babies is immunised in England and Wales.

Your Council has no cause for anxiety regarding the immunisation rate amongst children in your District. The immunised baby is now the rule - not the exception; practitioners and nurses and health visitors are active in immunisation propaganda while mothers fully appreciate the value of the protection offered to their babies. School children not immunised in infancy are offered inoculation by the School Medical Officer as a routine procedure. Ninety per cent of parents of school children agree to primary immunisation or to "booster" doses offered to their children at school; consequently a sufficiently high proportion of local school children enter adult life with satisfactory immunity. The total births in Area 5 (south east Norfolk) in 1954 were 560 and during the year 486 children under the age of 5 were immunised. Primary immunisations and "booster" doses for school children, carried out over the period 1953-1954, amounted to 3,463. The school population is approximately 5,500.

(i) Vaccination

The vaccination rate for Area 5 in 1954, was 67% and compares very favourably with the general rate for England and Wales.

VI. Tuberculosis

Ten new cases of Tuberculosis were recorded within the Depwade Rural District during the year; eight of these were tuberculosis of the lungs. Some of these were detected by Mass Radiography when the Norwich Radiography Unit visited Diss.

While notified cases in England and Wales show little decrease in recent years nevertheless a substantial decline in mortality from tuberculosis is recorded. Deaths in 1953 were only 40 per cent of what they were in 1948. The more thorough follow-up of contacts and the more extensive use of mass radiography may account, to some extent, for the sustained level of notifications. In 1953, approximately one out of every twelve new cases (England and Wales) was detected by examination of contacts and one out of every five by mass radiography.

Susceptibility to tuberculosis is greatest in the 15-24 age group and, in the same group, females are almost twice as susceptible to the disease as males. It follows, therefore, that any initial effort to reduce the incidence of tuberculosis by vaccination should be introduced at the school leaving age. In 1954 the Minister of Health approved the extension of B.C.G. vaccination to children approaching their fourteenth birthday. In the County an offer of vaccination was made to school leavers attending those schools within a ten mile radius of Norwich, i.e. potential city workers. This involved only one school in Area 5, Wymondham Secondary Modern School, where the response by parents and children was very good.

A Health Visitor from the Norwich Chest Clinic investigates the living conditions of all reported cases of tuberculosis. Where necessary arrangements are made for rehousing. All family contacts are invited to X-ray examination and the benefit of vaccination (B.C.G.) is offered to those contacts who stand in need of it.

VII. Milk

Under the Milk Regulations 1954, only milk with the special designation "pasteurised", "Tuberculin-tested", and "sterilised", may be sold to the public within the Rural District of Depwade (and throughout south east Norfolk). Large areas of England and Wales have already been specified and when completed the scheme will cover at least 68% of the population of England and Wales. Further Regulations to ensure milk safety include the following: the sale of pasteurised milk (and T.T.milk) by can and dipper is illegal; retailers who bought pasteurised milk in bulk containers and bottled it for delivery are now required to purchase from their suppliers pre-packed pasteurised milk in bottles, cans, or churns sealed by the pasteuriser. There are also new regulations regarding the labelling, capping, and sealing of containers.

Action was taken during the year on four reports of tubercle bacillus in milk; four reports of brucella abortus, and one report of combined infection with tubercle bacillus and brucella abortus. Temporary restriction on supplies was necessary in two cases only.

VIII. Water Supplies

- (a) Routine bacteriological examinations of the district water supply made during the year gave satisfactory results.
- (b) About thirty miles of new mains were laid in 1954 and put into operation, while many more miles were laid but not put into operation until 1955.

The Water and Sewerage Engineer has kindly supplied the following notes:

"During 1954 approximately 30 miles of new mains were put into service affording supplies to 700 dwellings and 100 farms.

These mains were laid in Tivetshall St. Margaret, Tivetshall St. Mary, Gissing, Burston, Diss Heywood, Thorpe Abbots, Forncett End, Tacolneston and parts of Wacton, Forncett St. Peter, Forncett St. Mary, Bunwell and Carleton Rode.

The Water Towers at Burston and Bunwell and the Booster Station at Forncett were put into operation.

The water consumption in the area supplied from Pulham Tower increased from 730,000 gallons to 1,050,000 gallons per week during the year thus indicating that the time was approaching when it would be necessary to modernise the Rushall Waterworks".

Further detailed information regarding water supplies is contained in the Sanitary Inspector's Report.

(c) Fluoridation of Water Supplies

Preliminary studies regarding fluoridation of water supplies are being carried out by the Government in certain areas of Great Britain. These studies will take five years or longer. It is the Government's view that studies under the Government scheme should come first and that the question of fluoridation in other areas should be considered in the light of the results obtained.

~~Your Council approved the principle of fluoridation at your September meeting last year. Meanwhile,~~ the County Dental Officer has kindly offered to carry out some dental surveys of school children when dental staff is available.

- (d) It is the usual practice to carry out blood examinations etc., to ensure that no employees in the water department are carriers of typhoid fever or dysentery. Such an examination of the Depwade employees was completed last year and no carriers were detected.

IX. Sewage Disposal

The following schemes were completed during 1954:

Dickleburgh. Conversions of earth closets to water closets and the connection of private properties to the sewer.

Tharston. Construction of a small sewerage scheme for three Council House sites.

Pulham Market. Laying of water mains and sewers for the extended Council Housing site.

X. Housing

Details of work under the Housing Acts are contained in the Report of the Sanitary Inspector.

- (a) Eighty-six new Council Houses were built during the year bringing the total provision of post-war Council dwellings to 778. The number existing pre-war was 620, making a total of 1398 at the end of 1954. This means that approximately 25% of the district population lives in the housing schemes provided by your Council - a very good record.

(b) At the time of writing this Report a housing survey is being carried out to ascertain the number of unfit houses - in accordance with the requirements of the Housing Repairs and Rents Act, 1954.

XI. Section 47 of the National Assistance Act and the Problem of the Aged.

Under Section 47 of the National Assistance Act powers are given to a Local Authority for the compulsory removal of certain persons to hospital or other suitable premises, on the recommendation of the Medical Officer of Health. Needless to say this is not a duty lightly undertaken and every effort is made to find an alternative solution to the forcible uprooting of the old and infirm from their quiet if insanitary homes and thrusting them unwillingly into the action of institutional life. Unfortunately it was necessary in one case to remove an old lady from her very insanitary home where she lived alone - a home which was a vast breeding place for fleas and completely overrun by rats. Moreover, this old lady of 83 was subject to intermittent fainting attacks; her stairs were dangerous, her sight was bad and she could not or would not use her outside lavatory. Usually action under Section 47 is avoided only by the quiet tactful work of the Welfare Officers who convincingly point out the advantages to be gained from entering a local institution. Here it should be said that very few, once admitted, wish to return to their former living conditions.

The question now arises as to what should be done to prevent a state of affairs in which an elderly person, infirm and incapable, lives under such insanitary conditions that no neighbour or paid Home Help is prepared to give assistance. Some social workers are of opinion that the position is aggravated by the lack of sense of responsibility on the part of children and relatives; that the family responsibility characteristic of previous generations is now moving towards a responsibility which is essentially communal.

A weapon to counteract the effects of this tendency is growing in strength. Fostered by Welfare Officers and Social Workers, Old Peoples Clubs are steadily increasing in popularity. Through the medium of Committee work and with close liaison between Welfare Officer and Health Visitor potential problem-elderly-persons within the Clubs' working areas can be helped before they reach the final stages of neglect. For this reason alone the initiation of Old Peoples' Clubs organised to keep a kindly eye on all old people within a parish deserves every encouragement.

The welfare of the aged is not merely a social problem it is becoming a medical problem which grows in intensity with the years. More people are living to old age than ever before and while immense advances have been made in saving the lives and keeping the health of the young much less progress has been possible in the prevention of the diseases of old age - brain haemorrhage, cancer, and the failing heart.

For years we have saved the lives of babies to swell the ranks of the chronic sick in old age. The infant mortality rate touches a new low record in each succeeding year: it is natural that we should contrive to find a good ending to a work so well begun.

Our best contribution to the welfare of the elderly is Housing - carefully planned, labour saving, and accident-proof as possible. Add to this kindly supervision, whether by Health Visitor, Warden, or Club Committee. We fuss over infant welfare: the aged need equal attention.

The provision of Group Homes for the aged, under the supervision of a warden, would create ideal conditions for communal welfare. Visiting relatives (occupying the living accommodation provided for such visits) would spend much of their time doing odd jobs beyond the powers of their aged hosts. It would therefore be an advantage to have in the warden's charge some of the more expensive domestic appliances which though required for occasional use only are nevertheless indispensable; a chest of special tools; a domestic ladder; chimney-cleaning outfit; sewing machine, etc., etc.

Communal washing machines would be useful, too. A communal dining-room for the daily dinner would have many advantages, social and economic. Elaborate kitchen facilities in each bungalow would not then be necessary. It is a little absurd to imagine, say, twenty wives cooking meals for themselves and twenty husbands. Cooking is the worst chore of the day for most women, particularly at the holiday end of life. Failing the communal dining-room, the organised delivery of hot meals is worth considering. There seems no reason why the enterprising itinerant merchant who sells from his mobile kitchen fish and chips hot from the stove, could not, with a little adaptation, vary his menu and contract to supply hot soups and stews at a reasonable cost.

XII. Accidents in the Home

Accidents in the Home in England and Wales continues to increase year by year. Fatal home accidents in 1949 numbered 4,904; in 1953 the figure was 5,895 (over 16 every day), and incomplete figures available suggest it will be higher again in 1954. The cost to the whole country in hospital treatment alone for home accidents is between 4 million and 5 million pounds a year. From 1940 to 1949 over 60,000 people died from accidents in the home compared with 48,000 in road accidents. In children between the ages of one and four years a fatal home accident is the third largest cause of death.

Old people, too, are particularly liable to accidents; four-fifths of fatal home accidents occur in children under five years of age and in old people of 65 years and over.

The most frequent type of fatal home accidents are as follows:-

Falls	60 per cent
Burns and Scalds	10 per cent
Coal gas poisoning	10 per cent
Suffocation	9 per cent
Poisoning	3 per cent

To assist in the campaign against domestic accidents - so many of which are preventable - the Home Safety Department of the Royal Society for the Prevention of Accidents have urged the setting up of local home safety committees. The Infant Welfare Centre is the most appropriate place for advising mothers regarding safety measures in the home.

XIII. Health Education

The fundamental factors in environmental sanitation are: potable water; swift and sanitary disposal of excreta; good housing; safe food supplies. Progress in public health may be measured by the degree of sustained effort directed towards these fundamental needs. Without a good standard of environmental sanitation the individual is greatly handicapped in practising the personal hygiene so essential for the control of communicable diseases.

We move continually in company with carriers of dysentery, poliomyelitis, the typhoids, infective jaundice, and the germs of food poisoning of various sorts - not to mention tuberculosis and the common infectious diseases of childhood. For the survival of their species the germs which cause these diseases must pass from one human host to another and one of the obvious and usual ways is via the intestinal tract. We say in a fatalistic way "I picked up a germ somewhere". Nine times out of ten we would be furious if we knew just how we did pick up the germ: the failure of a cook or a waiter to wash his hands before handling our food (and it is well handled); or the friend we contact who failed to wash when he should - clean though he may appear to be.

And so we are back again to the question of Health Education. It has been said that we are fast reaching a stage when the environmental sanitation which can be provided by the community has reached its limit and for the rest - the individual must look after himself. But the problem for the individual is the difficulty of learning where lies real danger to his health; of distinguishing between dirt that doesn't matter very much and dirt (often invisible) that is very dangerous. The same person who throws up his hands in horror at sight of the caterpillar in the cabbage or the maggot in the raspberry (both harmless) will cheerfully eat afresh duck egg which has been boiled for a few minutes only (potentially highly dangerous). Food cooked in a dirty frying-pan carries little risk while to eat a trifle prepared by a clean hand which bears a clean bandage covering a septic finger might have disastrous consequences.

Better Health is reached by highways marked Statistics and Propaganda. These roads sound hopelessly dull to most people; our task is to put life and interest into them.

Conclusion.

In conclusion I wish to thank the Chairman and Members of the Public Health Committee for their continued support and encouragement and for the enthusiastic and efficient help given me by all members of the Sanitary and Clerical staff.

W. Holmes

DEPWADE RURAL DISTRICT COUNCIL

Table 1. GENERAL STATISTICS

Area (in acres)	79,742
Estimated Resident Population	18,150
Rateable Value	£58,709
Sum represented by a Penny Rate	£235.10s 2d

Table 2. LIVE BIRTHS

	Males	Females	Total
Legitimate	145	116	261
Illegitimate	8	4	12
Total	153	120	273

Live Birth Rate per 1,000
of estimated Resident Population

Depwade Rural District	15.0
Ø Area 5.	13.4

Table 3. STILL BIRTHS

	Males	Females	Total
Legitimate	6	3	9
Illegitimate	-	1	1
Total	6	4	10

Still Birth Rate per 1,000
total births.

Depwade Rural District	35.3
Ø Area 5.	26.0

Table 4. DEATHS (all ages)

Male	Female	Total
119	116	235

Crude Death Rate
per 1,000 of estimated Resident Population

Depwade Rural District	12.9
Ø Area 5.	11.6

Table 5. INFANT MORTALITY (Deaths of Infants under One Year)

	Males	Females	Total
Legitimate	1	1	2
Illegitimate	-	-	-
Total	1	1	2

Infant Mortality per 1,000 Live Births

Depwade Rural District	7.3
Ø Area 5.	7.1

NOTE

Area 5 comprises Depwade & Loddon R.D's and Diss & Wymondham U.D's.

Table 6. CAUSE OF DEATH OF INFANTS UNDER ONE YEAR - Depwade R.D.

	Males	Females	Total
23. Pneumonia.	1	-	1
31. Congenital Malformations.	-	1	1
Total	1	1	2

Table 7. CAUSE OF TOTAL DEATHS (Registrar-General) - Depwade R.D.

	Males	Females	Total
1. Tuberculosis, Respiratory.	1	-	1
2. Tuberculosis, other.	-	-	-
3. Syphilitic disease.	1	-	1
4. Diphtheria.	-	-	-
5. Whooping Cough.	-	-	-
6. Meningococcal infections.	-	-	-
7. Acute poliomyelitis.	-	1	1
8. Measles.	-	-	-
9. Other infective and parasitic diseases.	-	-	-
10. Malignant neoplasm, stomach.	4	2	6
11. Malignant neoplasm, lung, bronchus.	4	-	4
12. Malignant neoplasm, breast.	-	3	3
13. Malignant neoplasm, uterus.	-	1	1
14. Other malignant & Lymphatic neoplasms.	8	14	22
15. Leukemia, Aleukemia.	-	-	-
16. Diabetes.	-	1	1
17. Vascular lesions of nervous system.	14	22	36
18. Coronary disease, angina.	23	16	39
19. Hypertension with heart disease.	-	2	2
20. Other heart diseases.	24	27	51
21. Other circulatory diseases.	6	4	10
22. Influenza.	-	-	-
23. Pneumonia.	4	6	10
24. Bronchitis.	4	4	8
25. Other diseases of respiratory system.	1	1	2
26. Ulcer of stomach and duodenum.	2	-	2
27. Gastritis, enteritis & diarrhoea.	-	-	-
28. Nephritis and nephrosis.	-	-	-
29. Hyperplasia of prostate.	2	-	2
30. Pregnancy, childbirth & abortion.	-	-	-
31. Congenital malformations.	-	2	2
32. Other defined & ill-defined diseases.	16	7	23
33. Motor vehicle accidents.	2	-	2
34. All other accidents.	1	3	4
35. Suicide.	2	-	2
36. Homicide and operations of war.	-	-	-
Total	119	116	235

Table 8. NOTIFICATIONS OF DEATHS RECEIVED DURING THE YEAR 1954
(According to Age Groups) - Depwade R.D.

	Males	Females	Total
Under 1 year	1	1	2
1 and under 5	-	-	-
5 " " 10	-	1	1
10 " " 20	2	2	4
20 " " 30	-	1	1
30 " " 40	4	3	7
40 " " 50	5	3	8
50 " " 60	13	8	21
60 " " 70	12	15	27
70 " " 80	45	43	88
80 " " 90	31	31	62
90 " " 100	6	8	14
100 and over	-	-	-
Total	119	116	235

Table 9. SUMMARY OF BIRTH AND DEATH RATES

	1948	1949	1950	1951	1952	1953	1954
<u>Live Births (per 1,000 pop)</u>	(308)	(252)	(267)	(287)	(295)	(260)	(273)
Depwade Rural District.	17.3	16.7	14.8	15.8	16.3	14.4	15.0
Area 5.	15.7	14.5	14.9	15.4	15.6	14.3	13.4
England and Wales.	17.9	16.7	15.8	15.5	15.3	15.5	15.2
<u>Still Births (per 1,000 total births)</u>	(11)	(4)	(3)	(5)	(12)	(5)	(10)
Depwade Rural District.	34.4	13.2	11.1	17.4	39.0	18.8	35.3
Area 5.	30.4	27.0	23.0	26.8	28.0	17.1	26.0
England and Wales.	(Not Published)				-	22.6	24.0
<u>Crude Deaths (per 1,000 pop)</u>	(217)	(252)	(240)	(256)	(231)	(200)	(235)
Depwade Rural District.	12.2	14.0	13.3	14.1	12.8	11.0	12.9
Area 5.	12.9	13.3	12.1	14.0	12.6	10.9	11.6
England and Wales.	12.8	11.7	11.6	12.5	11.3	11.4	11.3
<u>Infant Mortality (per 1,000 live births)</u>	(8)	(9)	(6)	(6)	(13)	(8)	(2)
Depwade Rural District.	25.9	31.4	22.4	20.9	44.0	30.7	7.3
Area 5.	26.8	21.0	14.5	27.5	28.8	34.8	7.1
England and Wales.	34.0	32.0	29.8	29.6	27.0	26.8	25.5

NOTE Figures in brackets are the actual numbers for Depwade R.D.

Table 10. NOTIFICATIONS OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS)
(According to Age Groups) - Depwade R.D.

	Under 1	1-2 yrs	3-4 yrs	5-9 yrs	10-14 yrs	15-24 yrs	Over 25	Total
Scarlet Fever	1	-	2	10	3	-	-	16
Measles	12	67	88	280	61	12	15	535
Whooping Cough	2	12	21	35	1	-	2	73
Pneumonia	1	1	-	3	1	3	14	23
Infective Jaundice	-	-	1	7	-	1	3	12
Erysipelas	-	-	-	-	-	-	9	9
Dysentery (Sonne)	-	-	1	3	1	-	2	7
Food Poisoning	-	-	-	-	-	-	1	1
Puerperal Pyrexia	-	-	-	-	-	-	3	3
Acute Poliomyelitis (Paralytic)	-	-	-	-	1	1	1	3
Weill's Disease	-	-	-	-	-	1	-	1
Malaria (Contracted abroad)	-	-	-	-	-	1	-	1
Total	16	80	113	338	68	19	50	684

Table 11. INCIDENCE OF INFECTIOUS DISEASE DURING 1954 (OTHER THAN TUBERCULOSIS) - Depwade R.D.

	Quarters				Total
	1st	2nd	3rd	4th	
Scarlet Fever	2	8	1	5	16
Whooping Cough	10	30	33	-	73
Measles	279	244	12	-	535
Pneumonia	9	7	5	2	23
Erysipelas	-	2	3	4	9
Infective Jaundice	1	-	1	10	12
Food Poisoning	-	1	-	-	1
Dysentery (Sonne)	-	1	-	6	7
Puerperal Pyrexia	-	2	-	1	3
Acute Poliomyelitis (Paralytic)	2	-	-	1	3
Weill's Disease	1	-	-	-	1
Malaria	-	-	-	1	1
Total	304	295	55	30	684

Table 12. INCIDENCE OF INFECTIOUS DISEASES (EXCLUDING T.B.)
DURING LAST FIVE YEARS - Depwade R.D.

	1950	1951	1952	1953	1954
Scarlet Fever	45	13	12	21	16
Whooping Cough	189	154	71	73	73
Measles	418	15	326	88	535
Pneumonia	25	45	26	16	23
Erysipelas	11	6	5	6	9
Infective Jaundice	16	9	5	2	12
Acute Poliomyelitis (Paralytic)	7	2	-	2	3
(Non-Paralytic)	2	-	-	-	-
Encephalitis (Infective)	1	-	-	-	-
Encephalitis Lethargica	1	-	-	-	-
Meningococcal Infection	2	-	-	-	-
Malaria	2	-	-	-	1
Food Poisoning	3	1	4	2	1
Weill's Disease	1	-	1	-	1
Puerperal Pyrexia	4	-	-	-	3
Undulant Fever	-	2	-	-	-
Dysentery	-	-	60	18	7
Ophthalmia Neonatorum	-	-	1	1	-
Diphtheria	-	-	1	-	-
Total	727	247	512	229	684

Table 13. TUBERCULOSIS (Details of New Cases during 1954)
Depwade R.D.

Age Period	Pulmonary		Non-Pulmonary	
	M	F	M	F
0-4	-	-	-	-
5-14	-	1	-	-
15-22	-	-	-	-
23-34	1	2	-	-
35-44	1	-	-	-
45-54	1	1	-	-
55-64	-	-	-	-
65 and over	1	-	1	1
Totals	4	4	1	1

Table 14. TUBERCULOSIS (NUMBER OF CASES ON T.B.REGISTER AS AT 31.12.54)
Depwade Rural District

	Males	Females	Total
Pulmonary	43	31	74
Non-Pulmonary	12	8	20
Total	55	39	94

Table 15. DETAILS OF NEW CASES OF TUBERCULOSIS FOR LAST FIVE YEARS
Depwade Rural District

		1950	1951	1952	1953	1954
Pulmonary	Male	5	4	7	7	4
	Female	6	5	7	1	4
Non-Pulmonary	Male	3	1	2	3	1
	Female	5	7	3	1	1
Total		19	17	19	12	10
Area 5	Total	31	36	43	24	23

Table 16. DIPHTHERIA IMMUNISATION

The following is the number of notifications of primary and booster injections received during the last five years in respect of Area 5.

	Primary Injections		Booster Injections		Total
	Under 5	Age 5-14	Under 5	Age 5-14	
1954	486	171	26	983	1,666
1953	493	392	36	1,855	2,776
1952	371	95	15	598	1,070
1951	460	70	9	178	717
1950	487	100	6	447	1,040

Table 17. VACCINATION AGAINST SMALLPOX

Vaccination of children (under five years of age) during the years 1951 to 1954 resident in the District and Area 5, are shown in the following table.

	DEPWADE R.D.				AREA 5.			
	1951	1952	1953	1954	1951	1952	1953	1954
Number of live births registered.	287	295	260	273	617	623	574	560
Number of vaccinations recorded.(0-4 yrs).	260	148	196	158	496	315	391	375
Percentage vaccinated.	90	50	75	58	80	50	68	67

Table 18. DEATHS DUE TO CANCER - Depwade R.D.

	1947	1948	1949	1950	1951	1952	1953	1954
Number of deaths	26	41	29	49	41	32	27	36
Percentage of total deaths	10.3	18.9	11.5	20.4	16.0	13.8	13.5	15.3

Table 19. DEATHS DUE TO CANCER (AREA 5)

	1947	1948	1949	1950	1951	1952	1953	1954
Number of deaths	59	83	82	84	86	82	74	87
Percentage of deaths	11.7	16.9	16.8	17.3	15.3	16.3	16.9	18.5

DEPWADÉ RURAL DISTRICT COUNCIL

ANNUAL REPORT OF THE SENIOR SANITARY INSPECTOR FOR 1954.

Mr. Chairman, Ladies and Gentlemen -

I have the honour to present to you my first Annual Report.

On being appointed your Senior Inspector in succession to Mr. F. H. Bowden in September 1954, I saw no reason to make radical changes in the working of the Department, which has therefore continued to be carried out mainly on the lines of the past few years.

In August 1954, Mr. R. D. Frichard previously Assistant Sanitary Inspector to the Chelmsford Borough Council was appointed as Additional Inspector, and I am pleased to report that he has proved to be a very capable officer who has fitted in well with the working of the department.

Two major pieces of legislation passed during the year (a) The Slaughterhouses Act, 1954 - which brought private slaughterhouses into being again with attendant meat inspection duties, and (b) The Housing Rents and Repairs Act 1954 - which inter alia, introduced a scheme for increasing rents, modified and simplified Improvement Grant procedure, and called for a programme of slum clearance from every Local Authority. More about these items under their respective headings in the Report.

The following report is on similar lines to that of 1953 (except for parts relating to new water mains, sewage works, etc., a report on which has now been prepared independently by your Water and Sewerage Engineer) and is in accordance with Ministry requirements.

HOUSING.

(a) General. The total number of separate units of dwelling accommodation in the District at 14.5.54 (as shown in the Rate Book) was 6,188 - an increase of 107 from the same time the previous year. This figure excludes all vacant dwellings subject to statutory orders and others unsuitable for further habitation. Based on the 1951 Census population of 18,152 this gives an average occupation figure of 2.933 persons per house.

(b) Actions taken under Sections 9 and 11, Housing Act 1936.

Following information in tabulated form is as required by Article 31 of the Housing Consolidated Regulations 1925:-

(1) The number of houses which on inspection were considered to be unfit for human habitation.....	22
(2) The number of houses the defects in which were remedied in consequence of informal action by the Local Authority or their Officers.	15
(3) The number of representations made to the Local Authority with a view to (a) the serving of notices requiring the execution of works or	1
(b) the making of demolition or closing orders.....	22
(4) The number of notices served requiring the execution of works.	1
(5) The number of houses which were rendered fit after service of formal notices.	1
(6) The number of demolition or closing orders made...	12
(7) The number of houses in respect of which an undertaking was accepted under subsection 3 of Section 11 of the Housing Act, 1936.	10
(8) The number of houses demolished.	23

The position at 31.12.54 regarding houses subject to Demolition Orders and undertakings still standing in the District was as follows:-

	<u>Demolition Orders.</u>	<u>Closing Orders.</u>	<u>Under- takings.</u>
No. of houses occupied ...	32	-	22
" " " vacant ...	41	5	50
	<u>73</u>	<u>5</u>	<u>72</u>

Total 150

It is relevant to note under this heading that in accordance with powers given under Section 5 of the Housing Rents and Repairs Act, 1954, the Demolition Orders on 5 properties in the District were removed during the year - the inspecting Sub-Committee having been satisfied that the houses in question had been brought up to a satisfactory standard.

Section 6 of the same Act also revoked the war-time legislation under which properties subject to Demolition Orders etc. were licensed for temporary occupations and gave Local Authorities power to issue licences for the maximum period of 3 years. "3 year" licences were issued in respect of 8 such dwellings - 5 other cases were held over for reconsideration following Sub-Committee inspections in January 1955.

- (c) Housing Act 1949 - 54 - Improvement Grants. The 1954 Act considerably simplified procedure for grants for the modernising of existing dwellings and conversion of other premises to dwellings, by giving Local Authorities a free hand in the issuing of grants, in most cases, without the prior approval of the Ministry. You, as a Council, had already wisely decided to apply the scheme and encouraged owners of suitable property to take advantage of it. It is interesting to note that of the 45 grants approved in 1954, 26 were in respect of premises which were let, the remaining 19 were to owner/occupiers. Only 4 of the grants were for conversions.

The total value of grants approved in 1954 was £9,988 - they ranged from the minimum £50 to the maximum £400 and the average was £224.

Note:- The cost of these grants is borne by the Ministry and Local Council in the ratio of 3 to 1, i.e. for every £400 borrowed for grant the tax-payer is paying loan charges for 20 years on £300 and the ratepayer loan charges for 20 years on £100. At the rate of interest payable in 1954 each £100 borrowed was costing the Council about £7.5.0. per annum for 20 years. Therefore, for the amount of grants approved by this Council in 1954 (£9,988) loan charges of approximately £180 for the next 20 years are payable, the equivalent of about a $\frac{3}{4}$ d. rate.

- (d) New Housing. During the year the Council built a further 52 two-bedroomed bungalows and 34 three-bedroomed houses - making a total of 778 permanent post-war dwellings - with the 620 pre-war houses - making a grand total of 1,398 permanent dwellings. 21 new private houses and bungalows were also erected in 1954.

Under this heading it is appropriate to record that of the original 86 Council post-war converted dwellings on ex Air Ministry sites etc., 57 were still in use at December 31st., 1954.

- (e) Overcrowding. The following figures show the number of cases of overcrowding brought to the notice of the department during 1954, but do not necessarily indicate the true state of affairs existing in the District.

No. of cases outstanding at 31.12.54.	4	
No. of new cases reported during 1954	<u>2</u>	6
No. of cases abated 1954		<u>2</u>
Remaining in register 31.12.54.		3

(f) Verminous and Dirty Premises. I am glad to be able to again report that generally speaking houses inspected during the year have been found to be kept in a clean and satisfactory condition. In 6 cases of dirty houses informal action was necessary, following which the tenants took the necessary measures to cleanse and redecorate the premises. One serious case of flea infested premises came to my notice, which necessitated action under Section 47 of the National Assistance Act, 1948, and which is referred to by the Medical Officer of Health in his report. Disinfestation of the premises was subsequently carried out by this Department.

(g) Moveable Dwellings. The number of moveable dwellings licensed under the Public Health Act 1936 during 1954 was as follows:-

No. licensed at 31.12.53.	19
New licences issued in 1954	<u>7</u>
	26
No. of moveable dwellings removed or ceased to be used as such during 1953	<u>10</u>
No. licensed at 31.12.54.	<u>16</u>

There are no licensed caravan sites in the District.

All the licensed moveable dwellings have been inspected during the year and found to be maintained in a satisfactory manner.

(h) Concluding remarks re Housing. The requirement of Section 1 of the Housing Rents and Repairs Act, 1954, that all Local Authorities should within 12 months submit figures of unfit houses within their areas with proposals for dealing with them, caused the Housing Rural Survey which had been in slow progress since about 1945 to be terminated, and late in the year it was decided to appoint a suitable experienced person to carry out an outline survey for the purposes of the above requirement. At the time of preparing this report this new survey has been carried out in 17 parishes and sufficient data obtained to submit the necessary slum clearance proposals to the Ministry.

One of the principal provisions of the 1954 Act enabled landlords to increase rents to a small extent in respect of dwellings in good repair. I have no direct evidence as to what use landlords in the District have made of this provision, but during 1954 and in fact up to the date of preparing this report not one application has been received from a tenant for a "Certificate of Disrepair" - which may be some indication that few, if any, tenants have been required to pay the increased rents. This attempt to bring about some reasonable relationship between rents and the present day high cost of house repairs and maintenance does not appear to have been very realistic.

WATER SUPPLIES.

(a) Mains Supplies. During the year 10 routine samples were taken from existing mains (9 bacteriological and 1 chemical). With one exception, these were all reported as satisfactory - in the other case a very low non-faecal bacteriological count caused the sample to be reported as "Suspicious" - the matter was referred to the Water and Sewerage Engineer and a further sample taken a few days later after main flushing was reported as "highly satisfactory".

The extensive lengths of new mains laid necessitated the taking of 53 bacteriological samples to ensure satisfactory supplies before the mains were put into use. For record purposes only the results were as follows:- Satisfactory 27, Suspicious 8, Unsatisfactory 18.

Note:- Information regarding new mains laid etc. and the number of premises in this District supplied with mains water is contained in a separate report prepared by the Water and Sewerage Engineer attached hereto.

- (b) Private Supplies. The following table shows the number of samples taken from private supplies with the respective results:-

	Bacteriological				Chemical			
	No. taken	No. fit	No. doubtful	No. unfit	No. taken	No. fit	No. doubtful	No. unfit
Shallow Wells	62	13	4	45	3	2	-	1
Bores	7	6	1	-	-	-	-	-
Total	69	19	5	45	3	2	-	1

In cases where alternative satisfactory supplies have not been available, shallow wells have been sterilised with sodium hypochlorite following cleaning out with some measure of success.

No serious cases of water shortages were reported during the year; Council water carting was carried out on a small scale in 4 parishes.

SCAVENGING.

- (a) Refuse Collection and Disposal. This service has continued working quite satisfactorily along the same lines as for the past few years - fortnightly collection in all Parishes except Harleston where a weekly service is given. The same vehicles (2 Dennis 10 cu.yd. side loaders and Fordson Utility Van) and 7 men have carried out the work - one man is employed part-time on this work and part-time on cesspool emptying. 10 small extensions involving 73 premises were added to the refuse collection areas during the year, and with new houses erected, brings the total of houses included in the service to 5,789 (93% of all houses in the District).

Refuse continues to be disposed of by semi-controlled tipping at the same 5 tips situated at Weybread, Ashwellthorpe, Fornsett, Hempsall and Roydon. With the limited amount of labour available every effort is made to maintain these tips in as satisfactory a condition as possible; nuisances from flies and other insects are kept down by spraying the tip faces with proprietary insecticides and the rat-catcher gives all the tips regular treatments to keep down the rats.

8 $\frac{3}{4}$ tons of waste paper were sold during the year for £42.11.9. Sale of scrap aluminium refuse hods brought in £2.15.0. and £20 was received for the right to salvage light scrap iron from Weybread tip.

- (b) Night Soil Collection. Weekly collection of the contents of E.C. pails from premises in Harleston and the built up parts of Pulham Market, Pulham Mary and Mortwell has continued as previously. The work was carried out by using the Cesspool Emptyer and 3 men for 2 nights per week, and judging by the absence of complaints, a satisfactory service was given. Disposal of night soil in prepared "straw pans" at an isolated farm site has continued on the same satisfactory lines as previously.
- (c) Cesspool Emptying. Apart from night soil collection, the Dennis 800 gallon Cesspool Emptyer completed another full years work emptying cesspools, septic tanks, sewage works treatment tanks etc. all over the District and also in the areas of the Diss U.D.C. and Loddon R.D.C. Total mileage of this vehicle (including night soil work) was 9,465.

No. of loads collected from Depwade R.D.C. Housing Sites	...	...	482
" " " " " Private Premises within Depwade R.D.C.	...	...	292
" " " " " Premises outside Depwade R.D.C.	...	...	370
			<u>1,144</u>

Cesspool contents continued to be disposed of on suitable agricultural arable land and at the sewage disposal works at Tibenham and Thorpe Abbots and has proved satisfactory.

SUPERVISION of FOOD SUPPLIES and PREMISES.

- (a) Meat Inspection and Slaughterhouses. When on July 1st., 1954 meat was derationed, and the use of private slaughterhouses again became permissible, the Council agreed to a policy of licensing those slaughterhouses capable of being brought up to a reasonably hygienic standard. 16 applications for licences were received. Of these, 15 were approved in principle subject to the execution of improvement works and 1 refused. Of the 15 provisionally approved - by the end of the year 10 had been brought up to the required standard and licences issued.

Between July 1st. and December 31st. inspection of meat at these 10 slaughterhouses necessitated 427 visits and the following table shows the number of animals slaughtered, the number inspected and those found to be diseased:-

	Cattle Exclud- ing Cows.	Cows.	Calves.	Sheep & Lambs.	Pigs.
Number killed	362	20	1706	97	2408
Number inspected	362 100%	20 100%	637 37.34%	87 89.69%	1644 68.44%
<u>All diseases except Tuberculosis</u>					
Whole carcasses condemned.	-	1	1	-	1
Carcasses of which some part or organ was condemned	29	5	4	-	67
% of No. inspected affected.	8%	30%	.79%	-	4.14%
<u>Tuberculosis only.</u>					
Whole carcasses condemned	-	1	-	-	1
Carcasses of which some part or organ was condemned	14	2	-	-	64
% of No. inspected affected	3.87%	15%	-	-	3.95%

It will be observed that 100% meat inspection was not carried out in respect of calves, sheep and pigs, but the Council may be assured that all animals for consumption in the Depwade area are given 100% inspection and those not seen are intended for London trade and are inspected on arrival at Smithfield Market.

It is gratifying to note that the incidence of tuberculosis in food animals killed in this District is quite low, which is in my opinion partly due to the general trend towards the eradication of this disease in such animals and partly to the very high quality of meat killed in this District.

- (b) Food Premises - General. The total number of food premises other than dairies on the Council's Register at the end of the year was as follows:-

Food Shops	130
Fish Stalls	3
Restaurants, hotels, cafes, etc.	10
Public Houses	81
Bakehouses	10
Other (mills, factories, etc.)	10
	<hr/>
	244

Routine inspections of food shops have been carried out and generally speaking the cleanliness of premises and food handling hygiene have been found to be satisfactory, and no serious contravention of the requirements of the Food and Drugs Act, 1938, and Food Handling Byelaws have been encountered.

- (c) Bakehouses. The 10 premises in use as bakehouses at the end of 1953 have continued in use during 1954, and regular inspections have found them to be maintained in a clean and satisfactory condition.
- (d) Dairies and Milk Distribution. At the end of the year there were 17 registered retail distributors of milk operating in the District (apart from producer-retailers which are registered and controlled by the County Agricultural Committee), 7 of these operate from premises outside the District. Of the other 10, 2 use dairies at producers' premises, 1 uses a registered dairy, and the other 7 sell only milk which is delivered to them in bottles.

These retailers have been kept under observation and no contraventions of the Milk and Dairies Regulations have been observed.

45 licences for the sale of designated milk were issued by the Council as follows:-

"Tuberculin Tested" Dealers Licences	15
"Tuberculin Tested" Supplementary Licences	7
"Pasteurised" Dealers Licences	15
"Pasteurised" Supplementary Licences	8
	<hr/>
	45

- (c) Ice Cream. The number of premises registered in the District for the manufacture and/or sale of ice cream at 31.12.54 was:-

(a) for manufacture and sale	1
(b) for sale only	42
	<hr/>
	43

The 42 registered vendors all sell ice cream pre-packed as received from manufacturers outside the District. All the premises were inspected during the year and no case of a contravention of the Food and Drugs Act, or the Ice-Cream (Heat Treatment) Regulations was found.

- (f) Inspection and Condemnation of Other Foods. The following is a summarised list of all other foods condemned in the District during the year:-

15 tins of Meat - 21½ lbs.	1 tin of Milk - 1 lb.
1 tin of Fish - 1 lb.	5 tins of Fruit
	& Vegetables - 9¼ lbs.

Arrangements are made for this tinned food to be collected by the Refuse Collectors and it is disposed of by burying on the refuse tips.

FACTORIES AND WORKSHOPS.

The number of factories on the Council's register at December 31st., 1954, was as follows:-

Factories using mechanical power	...	...	74
Factories without mechanical power	...	...	10
			<u>84</u>

During the year 78 inspections of these premises were made and in 2 cases the sanitary accommodation provided for employees was found to be in an unsatisfactory condition. In both cases the required work was carried out following informal action. Inspections were also carried out at places where building operations have been in progress to ensure that satisfactory temporary sanitary arrangements have been provided for workmen.

Only one factory in the District is known to employ outworkers and the statutory notification list received in August 1954 from this firm contained the names of two outworkers, one of which was resident outside the District. One outworker living in the District was referred from Norwich County Borough. The two outworkers premises in the District have been inspected and found to be satisfactory.

RODENT CONTROL.

The following table summarises the work carried out by the Council's Rodent Operator during the year:-

		Local Authority property	Dwelling houses (Incl.C.Hs.)	Agric- cultural property	Other prem- ses	Total.
No.of inspections of properties as a result of notification, or in the course of survey.		64	2812	164	321	3361
No.of infestations found	(a)	24	94	8	19	145
(a) Minor,(b) Major.	(b)	13	29	8	10	60
No.of treatments carried out.		37	123	16	29	205
No.of dead rats & mice picked up.		378	478	117	108	1073

In the main occupiers of premises have been found to be co-operative with the Council's operator in the execution of his duties, and in no case was statutory action found to be necessary. Free treatment has been given at all private houses, and charges made for treatment at other premises (except Council property) on the basis of the actual cost to the Council.

All Council sewerage systems were test baited for rats during the year, and the only infestation found was in one small area at Harleston which was subsequently given two poison treatments.

OTHER MATTERS.

In addition to duties carried out under the above main headings, the usual routine investigations have been made in respect of cases of infectious disease and food poisoning - as directed by the Medical Officer of Health - and premises disinfected where considered necessary and when requested by occupiers. (Figures as to the incidence of infectious disease etc. in the District are contained in the Medical Officer's report). All day-to-day complaints regarding nuisances from foul ditches, choked drains etc. have been satisfactorily dealt with, and abated following informal action

- in no case was statutory action necessary. Two licences were issued under the Pet Animals Act, 1951.

283 plans were dealt with during the year in connection with the Department's work on control of new buildings etc. under the Building Byelaws and Town Planning - compared with 256 in 1953 and 236 in 1952.

In conclusion, I should like to express my thanks to the Medical Officer, the Clerk and all members of the Council staff for their assistance and co-operation in my first year of office as Senior Inspector, and to all members of the Council for their support in dealing with the various contentious matters reported to them from time to time.

F. C. WEEKS.
Senior Sanitary Inspector.

ANNUAL REPORT of the Water and Sewerage Engineer for the year 1954.

Mr. Chairman, ladies and gentlemen,

In view of the great expansion of your water undertaking, and to a lesser extent the increased provision of sewage disposal services, it is felt that an annual report from me giving details of the schemes in service and of the progress made on other schemes should be made to you. Since this is my first report I am including certain information to enable you to appreciate the exact extent of the services at the end of the year: my future reports will deal principally with the progress made during the year in question and can be read in conjunction with this report to obtain a complete appreciation of the position.

WATER SUPPLY.

1. Vital Statistics.

Total Capital Expenditure. (to 31st. March, 1955).....	£416,000.
Revenue Expenditure. (year ending 31st. March, 1955).....	21,330.
Revenue. do do	8,534.
Estimated Population served.....	11,273.
Number of houses served direct.....	3,352.
Number of houses served by standpipes.....	508.
Number of Metered supplies.....	389.
Length of mains in service, in miles.....	102.

2. Composition of Undertaking.

- (a) Headworks. The Council's principal headworks is at Rushall which supplies the water for the whole of the eastern area and the north-western area from Gissing northwards. The south-western area is fed from the Diss U.D.C. Waterworks where it was necessary to sink an additional borehole and instal pumping and treatment plant for which the Depwade R.D.C. is responsible for approximately two-thirds of the cost.
- (b) Water Towers. Reinforced-concrete water towers exist at Pulham Market, Burston and Bunwell, and steel towers at Harleston and Long Stratton, the total storage capacity being 580,000 gallons.
- (c) Water Mains. 102 miles of water mains are in service, these being principally of spun iron varying in size from 12" to 3" diameter.

3. Brief Description of Supply System. The water from the Rushall Waterworks is pumped to the water tower at Pulham Market from whence it gravitates to the whole of the eastern area, the steel towers at Harleston and Long Stratton being used as balancing tanks in their respective areas. The water also gravitates to Gissing and Tivetshall in the western area, and to Fornsett in the north-western area where a Booster Pumping Station pumps the water to the Bunwell tower from whence it gravitates to the whole of the north-western area.

The south-western area extends to Burston in the north to Scole and Dickleburgh in the east. This area is fed by gravity from the Burston tower, the water being pumped thereto from the Diss Waterworks.

Bulk supplies are purchased from Loddon R.D.C., Wayland R.D.C., and Diss U.D.C. to enable certain parishes to have a piped water supply pending the laying of the necessary trunk mains from the Council's own sources.

4. Water Treatment. The raw water is very hard and has a strong iron content and there are thus lime softening and treatment plants at the headworks. The water is also chlorinated and tests of the chlorine content and the amount of hardness in the water are carried out daily.

5. Areas of supply. The following supplies were in operation at the end of the year:-

	Number of Houses.		Total.	Metered Supplies.	Estmtd. Popltn.
	Direct to Houses.	By Standpipe.			
Alburgh	85	10	95	16	285
Aslacton & Moulton	105	9	114	10	342
Bressingham	150	36	186	30	558
Brockdish	97	30	127	10	381
Bunwell & Carleton Rode	198	26	224	29	672
Burston	70	23	93	19	279
Denton	63	40	103	34	309
Dickleburgh	161	21	182	11	546
Earsham	133	7	140	6	420
Forncett	120	25	145	21	435
Gissing	51	7	58	7	174
Hempnall	180	28	208	26	624
Long Stratton	244	40	284	20	852
Morningthorpe	55	12	67	11	201
Needham	58	10	68	9	204
Pulham Market	143	19	162	11	486
Pulham St. Mary	140	9	149	17	447
Redenhall with Harleston	532	81	613	27	1532
Roydon	120	22	142	10	426
Scole	261	12	273	15	819
Starston	65	2	67	7	201
Tacolneston	50	8	58	3	174
Tasburgh	84	5	89	10	267
Tharston	54	3	57	14	171
Tivetshall St. Mgt.	34	6	40	7	120
Tivetshall St. Mary	48	8	56	4	168
Wacton	21	9	30	5	90
Wortwell	30	-	30	-	90
	3352	508	3860	389	11,273
Position at end of 1953	2718	349	3067	292	9,201
Increase during 1954	634	159	793	97	2,072

6. Works constructed during 1954.

Good progress was made on Stage II of your comprehensive scheme, and approximately 30 miles of new mains were put into service affording supplies to nearly 800 dwellings and 100 farms in the following parishes:-

Burston, Bunwell, Carleton Rode, Diss Heywood, Gissing, Brockdish (Thorpe Abbotts), Forncett St. Peter, Forncett St. Mary, Tacolneston and Wacton.

The construction of the reinforced-concrete water towers at Burston and Bunwell was completed during the year; and the Booster Pumping Station at Forncett and the new pumping plant at the Diss U.D.C. Waterworks were put into operation.

50 connections to the existing mains were made during the year.

7. General Remarks.

(a) Rushall Waterworks. The daily consumption at the end of the year was 189,000 gallons of which 143,000 gallons was obtained from Rushall, an increase of 40,000 gallons during the year. The estimated maximum capacity of the plant is 200,000 gallons per day and it is thus apparent that the time is approaching when it will be necessary to modernise the works.

The increased consumption made it necessary to employ an additional attendant at the waterworks in order that a double-shift could be worked. The introduction of this system assisted in reducing the cost of producing 1,000 gallons of water by $\frac{3}{4}$ d. during the year.

(b) Fractured Mains and service pipes. 18 fractures were repaired during the year, some of which were caused by the movement of the

, 'clay subsoil whilst others were due to the corrosive action of the soil. Increasing evidence was found of the vital necessity for consumers to comply with the Council's regulations with regard to the protection of service pipes, it being found that unprotected galvanised pipes have been corroded through in less than twelve months in some areas.

SEWERAGE AND SEWAGE DISPOSAL.

1. Details of existing schemes.

(a) Public Health Act Schemes. Village sewerage schemes are in existence at Harleston, Long Stratton, Dickleburgh and Hempnall, and at Scole the disposal works for the village scheme has been constructed but only the sewers necessary to serve the Council houses have as yet been laid.

(b) Housing Site Schemes. Small schemes have been constructed for the following housing sites which are thus able to enjoy main drainage facilities:-

Brockdish	28	dwellings.
Bressingham, The Common	18	do
Bressingham, School	12	do
Bunwell, Greenways	44	do
Carleton Rode, Flaxlands & Greenways	38	do
Fritton, School Road	12	do
Fornsett St. Peter	14	do
Pulham Market, Julians Way & Mill Lane	52	do
Pulham St. Mary, Norwich Road & Station Rd.	46	do
Roydon	34	do
Tasburgh, The Turnpike	16	do
Tivetshall Nr. School and Green Lane	24	do
Tacolneston, Turnpike and West Way	26	do
Tharston	24	do
Wortwell	30	do
Thorpe Abbotts (ex. Air Ministry Works).	30	do
Tibenham do	15	do
Fersfield do	26	do

2. Works completed during 1954.

(a) Public Health Act Schemes.

Dickleburgh. Conversion of E.C.'s to W.C.'s and the connection of private properties to the sewer.

(b) Housing Site Schemes.

Tharston. Laying of sewers and construction of disposal works for three housing sites containing a total of 24 houses.

Pulham Market. Laying of Water mains and sewers for an extension of the housing site.

I am, ladies and gentlemen,
Your obedient servant,

D.O. CHILVER.

Water & Sewerage Engineer.

